

**LOBBYING SUPPLEMENTAL REGISTRATION FORM**

To be used for changes to registrations and terminations.

**Instructions**

1. Prior to making changes:
1. Complete form and return to Board of Ethics, 2413 Quail Dr., 3rd Floor, Baton Rouge, LA 70803, (225) 363-8777 or (800) 842-6630. No fee is required.
2. This form must be submitted within 5 days of any changes in your registration for new/add employees in those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

**FOR OFFICE USE ONLY**Postmark Date: 6-3-08*Supp. L**ACK✓***1072401**1. NAME Adams, Brady & Reese LLP E. LLP L. MC2. BUSINESS PHONE (225) 336-52003. BUSINESS ADDRESS 450 Laurel Street, Suite 1900 Baton Rouge, LA 70801  
Street and No. 450 City Baton Rouge State LA Zip 70801MAILING ADDRESS Same  
Street and No. Same City Same State Same Zip Same4. EMPLOYERS Adams, Brady & Reese LLP5. EMPLOYER'S ADDRESS Same  
Street and No. Same City Same State Same Zip Same6. Have you ceased or terminated all lobbying activities requiring registration? Yes Yes No No ✓

7. LIST BELOW (a) names; (b) persons, groups, or organizations which you are adding or eliminating; (c) the address of each such person or group, or organization listed; (d) the type of business each is engaged in or the purpose or function of the organization or group; (e) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name FedEx CorporationAddress 5421 Shady Grove Road Memphis, TN 38120Business or purpose: Transportation New RepresentativeDoes this person pay you? NOName, title, payor Adams, Brady & Reese, LLP Terminated its registration as of 6-3-08

## SUPPLEMENTAL REGISTRATION FORM

L005318
Lobbyist's Registration Number

1. Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Business or purpose \_\_\_\_\_  
 New Representation  
 Does this person pay you? \_\_\_\_\_  
 If no, who pays you? \_\_\_\_\_  
 Terminated Representation as of \_\_\_\_\_  
  
 2. Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Business or purpose \_\_\_\_\_  
 New Representation  
 Does this person pay you? \_\_\_\_\_  
 If no, who pays you? \_\_\_\_\_  
 Terminated Representation as of \_\_\_\_\_

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LDA-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

Form I-1, R-79 (2002)